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Total Number of Pages in This Submission 8

Application Number	09/824,966
Filing Date	04/03/2001
First Named Inventor	Apostol Konomi
Art Unit	2875
Examiner Name	Payne, Sharon E.
Attorney Docket Number	99-070-JK

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
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Remarks  
The enclosed amendment is merely a rewriting of allowable claims into independent form.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Lambert & Associates		
Signature	<i>Patrick D. Archibald</i>		
Printed name	Patrick D. Archibald		
Date	09/30/2005	Reg. No.	52,464

## CERTIFICATE OF TRANSMISSION/MAILING

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Signature	<i>Patrick D. Archibald</i>		
Typed or printed name	Patrick D. Archibald	Date	09/30/2005

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Apl. No. : 99/824,966

Applicant : Apostol Konomi

Filed : 04/03/2001

TC/A.U. : 2875

Examiner : Payne, Sharon E.

Docket No. : 99-070-JK

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

### **AMENDMENT**

Sir/Ma'am:

In response to the Office action of September 7, 2005, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 7 of this paper.